

NextGen Patient Record

Name: RICHARDSON, JONATHAN C

DOB:

CONTENTS

Encounter: 10/9/2023 8:19:27 PM

Nurse Visit

Encounter: 10/1/2023 9:24:38 AM

Nurse Visit

Encounter: 9/30/2023 9:34:48 AM

Nurse Visit

Encounter: 9/26/2023 3:44:01 PM

med_chm_provider_visit

Encounter: 9/21/2023 6:23:38 PM

chm_administrative_note

Encounter: 9/19/2023 8:28:48 AM

med_chm_provider_visit

Encounter: 9/12/2023 2:10:55 PM

med_bh_indiv_prog_note

Mental Status Classification

Encounter: 7/26/2023 9:31:31 AM

Disability Classification
Heat Stress Quesionnaire
med_chm_annual_nurse_enc
Medical Status Classification

Encounter: 7/24/2023 11:01:07 AM

med_chm_restriction_orders

Nurse Visit

Encounter: 7/22/2023 2:11:21 PM

med_chm_restriction_orders

Nurse Visit

Document 54-33

#: 903

Encounter: 7/16/2023 7:45:51 PM

Nurse Visit

Encounter: 7/15/2023 10:59:24 AM

chm_administrative_note

Encounter: 7/13/2023 8:34:30 AM

med_chm_provider_visit med_chm_restriction_orders

Encounter: 7/12/2023 1:07:43 PM

med_chm_restriction_orders

Nurse Visit

Encounter: 7/10/2023 10:07:51 AM

med_chm_restriction_orders

Encounter: 7/8/2023 9:04:40 AM

Nurse Visit

Encounter: 7/5/2023 1:51:29 PM

Nurse Visit

Encounter: 7/2/2023 8:44:07 AM

med_chm_restriction_orders

Nurse Visit

Encounter: 7/1/2023 12:08:13 PM

med_chm_restriction_orders

Nurse Visit

Encounter: 6/25/2023 5:37:08 PM

med_chm_restriction_orders

Nurse Visit

Encounter: 6/19/2023 11:10:24 PM

med_bh_indiv_prog_note

Encounter: 6/16/2023 6:34:18 PM

chm_administrative_note

Encounter: 6/12/2023 2:40:47 PM

med_chm_restriction_orders

Nurse Visit

Encounter: 6/6/2023 10:40:33 AM

Nurse Visit

Encounter: 6/5/2023 3:59:58 PM

in_m_cpct_mental_health

Encounter: 6/4/2023 10:19:13 AM

Nurse Visit

Encounter: 6/2/2023 7:18:31 PM

chm_administrative_note

Encounter: 6/2/2023 7:46:51 AM

med_chm_provider_visit

Encounter: 5/31/2023 10:33:59 AM

in_m_cpct_physical_health

Encounter: 5/30/2023 2:36:52 PM

med_chm_restriction_orders

Nurse Visit

Encounter: 5/23/2023 11:47:29 PM

chm_class_orders

Nurse Visit

Encounter: 5/23/2023 1:42:28 PM

Nurse Visit

Encounter: 5/23/2023 11:41:48 AM

med_chm_provider_visit med_chm_restriction_orders

Encounter: 5/21/2023 9:16:54 AM

med_bh_indiv_prog_note

Encounter: 5/8/2023 1:40:31 PM

med_bh_indiv_prog_note

Encounter: 5/5/2023 11:05:22 AM

in_m_cpct_mental_health

Encounter: 5/1/2023 11:01:38 PM

Nurse Visit

Encounter: 5/1/2023 3:02:55 AM

in_m_cpct_physical_health

Encounter: 4/28/2023 7:54:44 PM

chm_class_orders
Flu Screening Form

Heat Stress Quesionnaire

med_chm_intake

Syphilis Screening Form

Encounter: 4/28/2023 7:33:15 AM

med_chm_transfer_send

Encounter: 3/22/2023 1:22:08 PM

Nurse Visit

Encounter: 3/22/2023 7:15:15 AM

chm_class_orders
med_chm_provider_visit

Encounter: 3/1/2023 11:39:46 AM

med_bh_indiv_prog_note

Encounter: 12/21/2022 12:22:00 PM

med_bh_indiv_prog_note

Encounter: 12/8/2022 7:57:37 AM

LimitsOfConf

MED Telehealth Services Consent

med_bh_comp_assess

med_bh_eval_suicide_risk

med_bh_iap

Mental Status Classification

Document 54-33

#: 906

Encounter: 11/18/2022 7:38:14 AM

med_bh_indiv_prog_note

Encounter: 11/7/2022 6:32:08 PM

Disability Classification

Flu Screening Form

Heat Stress Quesionnaire

med_chm_intake

Medical Status Classification

Syphilis Screening Form

Encounter: 11/7/2022 12:08:30 PM

Flu Screening Form

med_chm_transfer_send

Encounter: 10/26/2022 2:33:47 PM

Nurse Visit

Encounter: 10/25/2022 8:13:08 AM

Master_lm

Encounter: 10/21/2022 12:31:36 PM

med_bh_indiv_prog_note

Encounter: 10/14/2022 1:49:07 PM

chm_administrative_note

Encounter: 10/6/2022 12:43:25 PM

chm_class_orders

Nurse Visit

Encounter: 9/27/2022 9:32:36 AM

med_chm_provider_visit

Encounter: 9/21/2022 10:08:25 AM

med_bh_indiv_prog_note

Encounter: 9/21/2022 8:23:38 AM

Nurse Visit

Encounter: 9/7/2022 1:07:22 PM

Document 54-33

med_bh_indiv_prog_note

Encounter: 8/17/2022 1:04:35 PM

med_bh_indiv_prog_note

Encounter: 8/11/2022 1:04:05 PM

med bh indiv prog note

Encounter: 7/26/2022 4:28:49 PM

med_bh_indiv_prog_note

Encounter: 7/25/2022 6:50:31 AM

med_bh_indiv_prog_note

Encounter: 7/20/2022 2:29:19 PM

Disability Classification

Flu Screening Form

Heat Stress Quesionnaire

med_chm_annual_nurse_enc

Medical Status Classification

Mental Status Classification

Encounter: 7/6/2022 1:21:03 PM

med_bh_indiv_prog_note

Encounter: 7/1/2022 6:59:29 AM

med_bh_indiv_prog_note

Encounter: 5/24/2022 4:12:46 PM

med_bh_indiv_prog_note

Encounter: 5/7/2022 12:15:50 PM

Nurse Visit

Encounter: 5/5/2022 10:34:03 AM

med_chm_provider_visit

Encounter: 4/26/2022 6:37:03 AM

med_bh_iap

med_bh_indiv_prog_note

Encounter: 4/15/2022 11:09:44 AM

chm_class_orders

Nurse Visit

Encounter: 4/13/2022 9:34:51 AM

Nurse Visit

Encounter: 4/6/2022 1:21:04 PM

chm_class_orders

Nurse Visit

Encounter: 3/31/2022 1:34:08 PM

med_bh_indiv_prog_note

Encounter: 3/2/2022 3:05:13 PM

med_bh_indiv_prog_note

Encounter: 2/8/2022 1:55:28 PM

med_chm_provider_visit

Encounter: 2/1/2022 11:53:14 AM

Nurse Visit

Encounter: 1/24/2022 9:09:08 AM

med_bh_indiv_prog_note



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Facility: BTC

#: 909

PATIENT:

DATE OF BIRTH:

DOC #:

VISIT TYPE:

DATE:

JONATHAN C RICHARDSON

127630

10/09/2023 8:19 PM

Nurse Visit

Nurse Visit

Nurse Protocols:

Review/Comments

Patient smokes 14.00 packs a year

Medications

Medication	Sig	PRN	PRN Reason	Comment
<u> </u>		Status	÷ ,	·
estradiol 2 mg tablet	take 4 tablet by oral route every day	N		
fluticasone 232 mcg-salmeterol 14	inhale 1 puff by inhalation route	N	į	
mcg/actuation breath activated powdr	2 times every day approximately 12 hours apart at the same times each day			
Minerin Creme topical	apply 1 unit by topical route 2 times every day	N		
Proventil HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route 4 times every day as needed for SOB and wheezing	Υ		
Singulair 10 mg tablet	take 1 tablet by oral route every day in the evening	N		
spironolactone 100 mg tablet	take 2 tablet by oral route every day	N		

<u>Orders</u>					
Status	Order	Timeframe	Frequency	Duration	Stop Date
completed	VITAMIN D, 1-25 OH		· · · · · · · · · · · · · · · · · · ·	X	
completed	IRON		the second of	7.7 4 5	
completed	TSH	•.	. M* W		·
completed	VITAMIN R12		•	- 1	

Patient Name: RICHARDSON, JONATHAN C

ID: 127630 Date of

Page 8 of 291 Encounter Date: 10/09/2023 08:19 PM

General Comments

VP completed in the left wrist with 23g butterfly needle x3 attempts, tolerated well. Collected 1 SST.

Document generated by: Carla J. Bollinger, RN 10/09/2023 11:21 PM

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Patient Name: RICHARDSON, JONATHAN C ID: 127630

Page 9 of 291 Encounter Date: 10/09/2023 08:19 PM



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Facility: BTC

PATIENT:

JONATHAN C RICHARDSON

DATE OF BIRTH:

127630

DOC #: DATE:

10/01/2023 9:24 AM

VISIT TYPE:

Nurse Visit

Nurse Visit

Reason for visit HCR # 249618/ chipping of nails

Statement of complaint (in patient's words): " My nails are chipping and breaking off in shards and wanting to get some keratin vitamins"

Vital Signs

Height

Time	<u>ft</u>	in	cm	Last Measured	1	Height Position	
9:25 AM				10/01/2023		- Marie - Mari	

Weight/BSA/BMI

	7					
Time	lb	oz	kg	Context	BMI kg/m2 BSA m2	
9:25 AM	213.0		96 615			

Blood Pressure

Time	BP mm/Hg	Position_	Side	Site	Method	Cuff Size	
9:25 AM	138/88	sitting	left	arm	manual	adult	

Temperature/Pulse/Respiration

Time	Temp F	Temp C	Temp S	itePulse/m	ninPattern	i	Resp/ min	. ,
9:25 AM	97.10	36.2	ear	89	regular		18	

Pulse Oximetry/FIO2

Time	Pulse Ox	Pulse Ox	O2 Sat	O2 L/Min	Timing	FiO2	L/min Delivery	Finger Probe
		(<u>Amb_%)</u> _				%	Method	
9:25 AM	97		RA			7-1111 11 - 11 - 11		

weasured b	y				
		 " · · · · · · · · · · · · · · · · · · ·		 	
Time	Measured by		. 1		
<u> </u>		 		 	

Patient Name: RICHARDSON, JONATHAN C ID: 127630 Date of Birth:

Page 10 of 291 Encounter Date: 10/01/2023 09:24 AM

9:25 AM Diane S. ChapmanHoffman LPN

Nurse Protocols:

ALTERATION IN SKIN INTEGRITY

Subjective:

Affected body part? fingernails Recent allergen exposure? no

"my nails just keep chipping off"

Signs & symptoms of infection: No evidence of infection.

Date of last tetanus booster: 06/09/2019

Assessment:

Alteration in skin integrity.

Review/Comments

Patient smokes 14.00 packs a year

Medications

Medication	Sig	PRN Status	PRN Reason	Comment
estradiol 2 mg tablet	take 4 tablet by oral route every day	N		
fluticasone 232 mcg-salmeterol 14 mcg/actuation breath activated powdr	inhale 1 puff by inhalation route 2 times every day approximately 12 hours apart at the same times each day	N		·
Proventil HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route 4 times every day as needed for SOB and wheezing	Υ		
Singulair 10 mg tablet	take 1 tablet by oral route every day in the evening	N		
spironolactone 100 mg tablet	take 2 tablet by oral route every day	N		

Orders

					
Status	Order	Timeframe	Frequency	Duration!	Stop Date
completed	Patient education				
COMPLETE	i diletti edacation				

provided

General Comments

Patient Name: RICHARDSON, JONATHAN C ID: 127630 Date of Birth:

Page 11 of 291 Encounter Date: 10/01/2023 09:24 AM 1/I submitted a hcr for fingernails breaking off. has chipping and breaking off in shards on fingernails. states takes a vitamin E daily. is requesting keratin vitamin for this issue. states they do not have keratin on commissary.. states its gotten worse in the last year. will refer this HCR to NP for evaluation.

Education	Date Provided	Provided By
Patient education provided	10/01/2023	Diane S.
		ChapmanHoffman
		LPN

Document generated by: Diane S. ChapmanHoffman LPN 10/01/2023 09:35 AM

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Patient Name: RICHARDSON, JONATHAN C

ID: 127630 Date of Birth:

Page 12 of 291 Encounter Date: 10/01/2023 09:24 AM



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Facility: BTC

PATIENT:

JONATHAN C RICHARDSON

DATE OF BIRTH:

127630

DOC #: DATE:

09/30/2023 9:34 AM

VISIT TYPE:

Nurse Visit

Nurse Visit

Reason for visit Sick Call

HCR#: 244767

Statement of complaint (in patient's words): my arms have lopious amounts of scar tissue that constantly drys out and cracks and itches, could you see me about this.

Vital Signs

Height

neight						
Time	ft	in	cm	Last Measured	Height Position	
9:36 AM	5.0	11.0	0.0	02/08/2014	0	

Weight/BSA/BMI

Time	<u>lb</u>	oz kg	Context	BMI kg/m2 BSA m2
9:36 AM	213.0	96.615	dressed with	29.70
			shoes	

Blood Pressure

=:						
Time	BP mm/Hg	Position	Side	Site	Method	Cuff Size
9:36 AM	110/70	sittina	riaht	arm	manual	adult

Temperature/Pulse/Respiration

Temperat	uic/ruisc/i	respiration					
Time	Temp F	Temp_C	Temp Site_	Pulse/min_	Pattern	Resp/ min	
9:36 AM	98 60	37.0	ear	68	The state of the s	18	

Pulse Oximetry/FIO2

	<u>,,</u>								
Time	Pulse Ox	Pulse Ox	O2 Sat	O2 L/Min	Timing	FiO2	L/min	Delivery	Finger Probe
	(Rest %)_	(Amb_%)				%		_Method_	
9:36 AM	97		RA			21			

Patient Name: RICHARDSON, JONATHAN C

ID: 127630 Date of Birth:

Page 13 of 291 Encounter Date: 09/30/2023 09:34 AM Measured By

	— J	_		
Time	Measured by			
9:36 AM	Patricia Thompson, RN			

Nurse Protocols:

MISCELLANEOUS AND OTHER COMPLAINTS

Subjective:

Associated symptoms: dry cracked skin

Previous history? Yes. Previous treatment? No. Result of injury? No.

Review/Comments

Patient smokes 14.00 packs a year

Medications

Medication	Sig	PRN Status	PRN Reason	Comment
estradiol 2 mg tablet	take 4 tablet by oral route every day	N		·
fluticasone 232 mcg-salmeterol 14 mcg/actuation breath activated powdr	inhale 1 puff by inhalation route 2 times every day approximately 12 hours apart at the same times each day	N		
Proventil HFA 90 mcg/actuation perosol inhaler	inhale 2 puff by inhalation route 4 times every day as needed for SOB and wheezing	Y		
Singulair 10 mg tablet	take 1 tablet by oral route every day in the evening	N		
spironolactone 100 mg tablet	take 2 tablet by oral route every day	N		

Orders

Status	Order	Timeframe	Frequency	Duration	Stop Date
completed	Medication allergies and contraindications reviewed and pregnancy ruled out prior to treatment		- Addition V Additional V Constitution of the Additional V Constit		
com pleted	Patient education provided		. At About 1/2 with at-	*** / * *#	
completed	Sick call if signs and symptoms of infection develop or symptoms do not subside	-		att	

Patient Name: RICHARDSON, JONATHAN C ID: 127630 Date of Birth:

Page 14 of 291 Encounter Date: 09/33/2023 09:34 AM

General Comments

ii has dry and craked skin from scar tissue where ii was burned years ago, wants to try minerin cream will ask np Gatwood for further evaluation.

Education	Date Provided	Provided By
Medication allergies and contraindications reviewed and	09/30/2023	Patricia
pregnancy ruled out prior to treatment		Thompson, RN
Patient education provided	09/30/2023	Patricia
·		Thompson, RN
Document generated by: Patricia Thompson, RN 09/30/2	023 09:39 AM	

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Patient Name: RICHARDSON, JONATHAN C ID: 127630 Date of Birth:

Page 15 of 291 Encounter Date: 09/30/2023 09:34 AM



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Facility: BTC

PATIENT:

JONATHAN RICHARDSON

DATE OF BIRTH:

127620

DOC#:

127630

DATE:

09/26/2023 03:44 PM

VISIT TYPE:

Provider Visit

Established patient

History of Present Illness:

1. Update

Rubicon consult was done with endocrinology for possible hormone increase. Response stated it is appropriate to increase estradiol in 2mg increments as long as LDL is not increasing. States Spironolactone is already optimized. Will increase estradiol at this time and recheck lipid panel in December.

PROBLEM LIST:

Problem Description	Onset Date	Chronic	Clinical Status	Notes 1
Gender identity disorder of adulthood	06/17/2020	N		
Asthma	06/06/2023	N		
Gastroesophageal reflux disease	02/19/2015	Y		Mapped from KBM Chronic Conditions table on 05/09/2016 by the ICD9 to SNOMED Bulk Mapping Utility. The mapped diagnosis code
		******		was Esophageal reflux, 530.81, added by Paul A. Talbot, MD, with responsible provider Paul A. Talbot MD. Onset date 02/19/2015.
Borderline personality disorder	05/04/2010	Y		Mapped from KBM Chronic Conditions tab'e on 05/09/2016 by the ICD9 to SNOMED Bulk Mapping Utility. The mapped diagnosis code was Borderline personality disorder, 301.83, added by Darla Hinshaw, MD, with responsible provider. Onset date 05/04/2010; Axis II.
Recurrent major depressive episodes, mild	10/21/2019	N		

Problem List (not yet mapped to SNOMED-CT®):

Problem Description	Onset Date	Notes	
Asthma	03/19/2007		
Polysubstance Dependence	01/17/2011	-	· · · · · · · · · · · · · · · · · · ·

RICHARDSON, JONATHAN C. 000000127630 07/21/1982 09/26/2023 03:44 PM 16/291

Case 3:23-cv-00135-RLY-CSW Document 54-33 Filed 03/07/24 Page 17 of 50 PageID #: 918

major depression in remission Nonspecific reaction to tuberculin 01/17/2011 02/01/2011

skin test witho

Epilepsy

06/11/2015

Allergies

Ingredient	Reaction	Medication Name	Comment
PENICILLINS	Rash		
IBUPROFEN	Rash		
CEFTRIAXONE SODIUM	SOB, chest pressure,	ROCEPHIN	Pt was given
	rash		0.5mg Epi x1
			and NS IV w/
-		•	good results

Suicide Risk Screening

Medications (Added, Continued or Stopped this visit)

Start Date	Medication	Directions	PRN Status	PRN Reason	Instruction	Stop Date
09/26/2023	estradiol 2 mg tablet	take 4 tablet by oral route every day	N			03/23/2024
09/19/2023	fluticasone 232 mcg-salmeterol 14 mcg/actuation breath activated powdr	inhale 1 puff by inhalation route 2 times every day approximately 12 hours apart at the same times each day	N			03/16/2024
09/19/2023	Proventil HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route 4 times every day as needed for SOB and wheezing	Υ .		 Please send as no inhaler at this time. 	03/16/2024
05/23/2023	Singulair 10 mg tablet	take 1 tablet by oral route every day in the evening	N			11/18/2023
08/28/2023	spironolactone 100 mg tablet	take 2 tablet by oral route every day	N			02/23/2024

Provider.

Gatwood, NP, Sara 09/26/2023 3:46 PM

Document generated by: Sara Gatwood, NP 09/26/2023 03:46 PM

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

RICHARDSON, JONATHAN C. 000000127630

09/26/2023 03:44 PM 17/291

DEPARTMENT OF CORRECTIONS ADMINISTRATIVE NOTE

SITE: BTC

COMPLETED BY: Patricia Thompson, RN 09/21/2023 6:23 PM



Division of Medical and Clinical Healthcare Services

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 45204

Facility: BTC

PATIENT:

DATE OF BIRTH:

DOC #:

DATE:

VISIT TYPE:

JONATHAN C RICHARDSON

127630

09/21/2023 6:23 PM

Chart Update

Issue

chart check complete

Provider: Sara Gatwood, NP

Document generated by: Patricia Thompson, RN 09/21/2023 06:27 PM

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204



Indiana Government Center South . 302 W. Washington Street Indianapolis, IN 46204

Facility: BTC

PATIENT:

JONATHAN RICHARDSON

DATE OF BIRTH:

127630

DOC#:

12/630

DATE:

09/19/2023 08:28 AM

HISTORIAN:

self

VISIT TYPE:

Chronic Care Visit

Established patient

Historian: self

History of Present Illness:

1. Asthma

I/I states symptoms occur daily and he uses rescuer inhaler about twice a day. States albuterol/rescue inhaler does provide symptom relief. Exacerbating factors include heat and allergy. I/I wakes with cough or dyspnea about once a week. Denies dyspnea or wheezing at rest, cough, chest pain or heart palpitations.

- 2. GENDER DSY
 - Currently taking 6mg of estradial and 100mg sprinolactone. States that changes have leveled off and she is hoping to have surgery when she leaves prison. In this case she is hoping to have a high level of
- 3. PATIENT EDUCATION PROVIDED

PROBLEM LIST:

Problem Description	Onset Date	Chronic	Clinical Status	Notes	1
Gender identity disorder of adulthood	06/17/2020	N			
Asthma	06/06/2023	N			
Gastroesophageal reflux disease	02/19/2015	Y		Utility. The mappe was Esophageal r added by Paul A.	on 05/09/2016 by MED Bulk Mapping ed diagnosis code reflux, 530.81, Talbot, MD, with der Paul A. Talbot
Borderline personality disorder	05/04/2010	Y		Utility. The mappe	on 05/09/2016 by MED Bulk Mapping ed diagnosis code ersonality disorder, Darla Hinshaw, ible provider.

RICHARDSON, JONATHAN C. 000000127630

09/19/2023 08:28 AM 19/291

Recurrent major depressive episodes,

10/21/2019

#: 921

mild

Problem List (not yet mapped to SNOMED-CT®):

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Allergies

Ingredient	Reaction	Medication Name	Comment
PENICILLINS	Rash		
IBUPROFEN	Rash		
CEFTRIAXONE SODIUM	SOB, chest pressure,	ROCEPHIN	Pt was given
	rash		0.5mg Epi x1
		•	and NS IV w/
			good results

Review of Systems

System	Neg/Pos_	Details
Constitutional	Positive	Weight gain.
Constitutional	Negative	Fever and weight loss.
Respiratory	Negative	Cough and dyspnea.
Cardio	Negative	Chest pain and irregular heartbeat/palpitations.
GI	Negative	Abdominal pain, constipation, diarrhea, nausea and vomiting.
Neuro	Negative	Dizziness, headache and seizures.

Vital Signs

Height

Time	ft	in	cm	Last Measured	Height Positio	
9:47 AM	5.0	11.0	0.0	02/08/2014	0	-

Weight/BSA/BMI

Time	lb	oz	kg	Context	BMI kg/m2	BSA m2
9:47 AM	213.0		96.615	dressed with	29.70	
				choec		

Blood Pressure

Time	BP mm/Hg	Position	Side	Site	Method	1 5	_Cuff Size	\neg
9:47 AM	138/82	sitting	left	arm	manual		adult	

Temperature/Pulse/Respiration

Time	Temp F	Temp C	Temp_Sit	tePulse/min	Pattern	Resp/ min
9:47 AM	96.50	35.8	ear	80	regular	18

Pulse Oximetry/FIO2

Time	Pulse Ox	Pulse Ox	O2 Sat	O2 L/Min	Timing	FiO2	L/min	Delivery	Finger Probe
L				 					

RICHARDSON, JONATHAN C. 000000127630

09/19/2023 08:28 AM 20/291

	(Amb %)	# 9 //	Method
9:47 AM 97	RA	21	

Comments

Time Comments
9:47 AM PEAK FLOW: 350 400 350.

Measured By

Time Measured by

9:47 AM Brittany R. Brumfield, MA

Physical Exam

rilysical Exami						
Exam	Findings	Details	4.741			
Constitutional	Normal	Well developed.				
Eyes	Normal	Conjunctiva - Rig	ght Normal, Le	ft: Normal.	•	
Respiratory	*	Auscultation - Fi	ndings: mild wh	neezing.		
Respiratory	Normal	Effort - Normal.	_	_		
Cardiovascular	Normal	Regular rhythm.	No murmurs,	gallops, or i	rubs.	
Abdomen	Normal	No abdominal to	enderness.			
Musculoskeletal	Normal	Visual overview	of all four extre	emities is no	rmal.	•
Neurological	Normal	Memory - Norm	nal.			
Psychiatric	Normal	Orientation - Or mood and affec	-	place, perso	n & situat	ion. Appropriate

Suicide Risk Screening

Assessment/Plan

needed.
landibilitation has
of
. •.
7

Medications (Added, Continued or Stopped this visit)

Start Date	Medication	Directions	PRN PRN Reason Status	Instruction Stop Date
08/03/2023	estradiol 2 mg tablet	take 3 tablet by oral route every day	N	01/29/2024
09/19/2023	fluticasone 232 mcg-salmeterol 14 mcg/actuation breath activated powdr	inhale 1 puff by inhalation route 2 times every day approximately 12 hours apart at the same times each day	N	03/16/2024

RICHARDSON, JONATHAN C. 000000127630 09/19/2023 08:28 AM 21/291

Case 3:23-cv-00135-RLY-CSW Document 54-33 Filed 03/07/24 Page 22 of 50 PageID

inhale 2 puff by inhalation 09/19/2023 Proventil HFA 90 mcg/actuation route 4 times every day as

> aerosol inhaler needed for SO8 and

wheezing

05/23/2023 Singulair 10 mg take 1 tablet by oral route N

tablet every day in the evening

08/28/2023 spironolactone 100 take 2 tablet by oral route N

mg tablet every day Please send as 03/16/2024

no inhaler at

this time.

11/18/2023

02/23/2024

Provider.

Gatwood, NP, Sara 09/21/2023 11:46 AM

Document generated by: Sara Gatwood, NP 09/21/2023 11:46 AM

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Facility: BTC

PATIENT:

DATE OF BIRTH:

DOC#:

DATE:

VISIT TYPE:

JONATHAN C RICHARDSON

127630

09/12/2023 2:10 PM

Onsite Consult

Individual Counsel/Psych Prog Note

General

Program Name: Outpatient

HCR#: 245438

Start time: 1:00 PM

End time: 00 hours, 30 minutes

Duration: 00 hours, 30 minutes

Individuals Present/Support Resources

Contact type: Onsite

Individual present.

Subjective Information

New issues/stressors/extraordinary events presented today. New issue resolved, no update required

Explanation: Met with I/I Richardson in MPB MH Office per HCR. I/I requested to have their MH Code reevaluated to a B-code for purposes of being able to transfer to a facility/programming that required a B MH code or above. No current psychiatric meds. Self-report is they have been stable. Staff is not aware of any documentation or secondhand reporting that disputes this. I/I discussed their recent ACLU case that landed them on various news stations and articles. Informed staff about some of their past psychiatric history included a reported stirt in the SNU. I/I also disclosed about Hx of self-harm, a previous attempt at self-castration using rubber bands that has resulted in permanent damage, "boiling" a finger off, and substantial amounts of cutting. Denied current SI/HI, and any plans of self-harm. Staff verbally safety-planned with I/I and instructed them to report any significant MH instability/thoughts about self-harm etc. and utilize MH services ASAP. I/I verbally agreed to the safety planning. Advised to submit HCR as otherwise needed.

Patient Name: RICHARDSON, JONATHAN C

ID: 127630 Date of Birth:

Page 23 of 291 Encounter Date: 09/12/2C23 02:10 PM #: 925

Update 9/14/23: After staffing with Dr. Verdon, recommend returning MH Code back to C until further evaluation of status can be reviewed.

Current Assessment

Assessment

The patient is compliant with the treatment plan. The patient is cooperative and communicative.

Risk Assessment

CURRENT ENCOUNTER

Risk Assessments

Patient denies suicidal ideation, plan, intent, and/or attempt.

Patient denies property damage ideation, plan, intent, and/or attempt.

Patient denies homicidal ideation, plan, intent, and/or attempt.

RISK ASSESSMENT HISTORY

Risk	Current	Past	Documented	Event Date	Approximate Date	ideation	Plan	intent	Scale
Suicide	Denies		09/12/2023	09/12/2023	No				
Property	Denies		09/12/2023	09/12/2023	No	1			
Homicide	Denies		09/12/2023	09/12/2023	No				

Attempt	Planned/	Drug/Alcohol	Medically	Plan Attempt Description	
l	_Impulsive_	_influenced	_Treated	<u> </u>	

SAFETY MANAGEMENT PLAN

Instructed to contact MH staff/submit HCR if significant MH instability, intent to self-harm, SI, and emotional dysregulation is experienced.

Assessment/Diagnosis

AXIS IV

Severity: Moderate

Severity. Woderate			
Problem Type	No/Yes	Description	
Primary Support Group	Yes	Very little external support	
Social environment	Yes	Difficulty Trusting Others - suspicious - isolates	
Legal system/crime	Yes ·	Incarcerated	

AXIS V

Current GAF: 59 Date: 09/12/2023.

Highest GAF: 72 Date: 05/08/2023.

Patient Name: RICHARDSON, JONATHAN C ID: 127630 Date of Birth:

Page 24 of 291 Encounter Date: 09/12/2023 32:10 PM

SIGNATURES

Staff: Signed by Elijah C. Sowry, MHP, MSW, on 09/14/2023 **Behavioral Health Billing**

Start time:

1:00 PM

End time:

1:30 PM

Duration:

00 hours, 30 minutes

Modifier:

N/A

Document generated by: Elijah C. Sowry, MHP, MSW 09/14/2023 04:16 PM

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Patient Name: RICHARDSON, JONATHAN C ID: 127630 Date of Birth:

Page 25 of 291 Encounter Date: 09/12/2023 02:10 PM



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 45204

Facility: BTC

Date: 09/12/2023 02:10 PM

Offender Name: JONATHAN C. RICHARDSON

DOB:

Gender: male
DOC nbr: # 127630

BEHAVIORAL HEALTH STATUS CLASSIFICATION

BH Code: C

A. Free of functional behavioral health impairment in the current living environment; individuals with short-term, self-limiting condition requiring minimal behavioral health intervention limited to (30) day's duration.

B. Psychiatric disorder that causes little functional impairment and requires infrequent psychiatric services. These services are routine in nature.

TO A CONTROL OF THE PROPERTY O



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Completed By

Cheryl A. Hauser, RN

Date Completed:

07/26/2023

Offender Name:

JONATHAN C. RICHARDSON

DOB:

BTC

Name of Facility:

" 40-

IDOC Number:

127630

DISABILITY CLASSIFICATION

Disability Code: A

Section A

A. _x_

No Disability. This category applies to all incarcerated individuals without significant physical, visual, hearing impairment.

B.

Incarcerated individuals who are blind or have other significant visual impairments: This category applies to those incarcerated individuals who are blind or visually impaired with bilateral vision defects that even with the best correction seriously adversely affects the incarcerated individual's ability to participate independently in ADLs.

This category is not used for incarcerated individuals who wear contact lenses or who have functional vision in one eye.

Incarcerated individuals with dual sensory impairment in which there is a disturbance of both vision and hearing which seriously adversely affects an offender's ability to participate in ADLs will be also classified to this category.

C.

Incarcerated individuals with a mobility or ambulation impairment, including wheelchairs and crutches: This category applies to those incarcerated individuals with a neuromuscular impairment that seriously adversely affects the incarcerated individual's locomotion or gross motor functions. The impairment must be such that is seriously interferes with the incarcerated individual's ability to participate independently in ADLs. Examples include but are not limited to: paralysis; neuromuscular disorders which impair strength such as myasthenia gravis; or, spastic disorders such as cerebral palsy.

D.

Incarcerated individuals who are deaf or have other profound hearing loss, or who have certain communication impaired disorders. This category applies to those incarcerated individuals who are deaf or suffer from a profound hearing loss in which there is a bilateral disturbance of

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

hearing that cannot be corrected with amplification and that seriously adversely affects the incarcerated individual's ability to participate independently in ADLs. Incarcerated individuals with a hearing loss corrected with a hearing aid do not belong in this category.

Document 54-33

Incarcerated individuals with other communication impairment disorders in which there is a disturbance of articulation, speech, voice, or language which seriously adversely affects the incarcerated individual's ability to participate in ADLs despite maximal therapeutic measures will also be assigned to this category.

Date: 07/26/2023 09:32 AM **Provider:** Christina Nudi FNP

Document generated by: Cheryl A. Hauser, RN 07/26/2023 09:32 AM



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Cheryl A. Hauser, RN

Completed By:

Date Completed: 07/26/2023

Offender Name: JONATHAN C. RICHARDSON

DOB:

Gender: male Name of Facility: BTC

IDOC Number: #127630

HEAT STRESS QUESTIONNAIRE

Do you weight more than the weight indicates for your age and height on the weight table on the reverse of this form? yes

Are you pregnant and in the second half of the pregnancy? no

Do you have emphysema? no

Do you have chronic obstructive lung disease? no

Do you have congestive heart failure? no

Do you have chronic kidney disease? no

Do you have cirrhosis of the liver? no

Do you take medication to relax the urinary bladder and help control urination? no

Do you take water pills (diuretic medication)? yes

Do you take ·medication to control allergies? yes

Do you take medication to control mental illness? yes

Do you take medication to control the side effects of medication used to control mental illness? no

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Indiana Government Center South 302 W. Washington Street Indianapolis, IN 45204

Do you take medication to control intestinal spasm? no

Do you take any other medication that has been prescribed by a doctor? no

Date: 07/26/2023 09:36 AM Provider: Christina Nudi FNP

Document generated by: Cheryl A. Hauser, RN 07/26/2023 09:36 AM

DEPARTMENT OF CORRECTIONS ANNUAL NURSE WELL ENCOUNTER

SITE: BTC

COMPLETED BY: Cheryl A. Hauser, RN 07/26/2023 9:31 AM



State of Indiana

Division of Medical and Clinical Healthcare Services

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Facility: BTC

PATIENT:

JONATHAN C RICHARDSON

DATE OF BIRTH:

127630

DOC#: DATE:

07/26/2023 9:31 AM

VISIT TYPE:

Nurse Visit

Vital Signs

Haiabt

neight					(
Time	ft ,	in	cm	Last Measured	Height Position
9:37 AM	5.0	11.0	0.0	02/08/2014	0

Weight/BSA/BMI

Time	lb	oz	kg	Context	BMI kg/m2	BSA m2	4
9:37 AM	213.0		96.615	dressed with	29.70		
			-	shoes			

Blood Pressure

Time	BP mm/Hg	Position	Side	Site	Method	Cuff Size
9:37 AM	126/86	sitting		arm	manual	adult

Temperature/Pulse/Respiration

Time	Temp F	Temp C	Temp	Site Puls	e/min	Pattern	Resp/ min
9:37 AM	96.90	36.1	ear	66			20

Pulse Oximetry/FIO2

i disc ex.								
Time	Pulse Ox	Pulse Ox	O2 Sat	O2 L/Min Timing	FiO2	L/min	Delivery	Finger Probe
	(Rest %)	_(<u>Ámb %</u>)_			%		Method	
9:37 AM	96							

Measured By

Time	Measured by		- t	
9:37 AM	Cheryl A. Hauser, RN	-	•	

RICHARDSON, JONATHAN C. 000000127630

07/26/2023 09:31 AM Page: 32/291

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DEPARTMENT OF CORRECTIONS ANNUAL NURSE WELL ENCOUNTER

#: 934

SITE: BTC

COMPLETED BY: Cheryl A. Hauser, RN 07/26/2023 9:31 AM

Hemoptysis: Hemoptysis: No Known TB exposure: no

TB Review

Placed	Site	Side	Read	Result
07/20/2022	arm	left	07/23/2022	0 mm
07/10/2021	arm	left	07/11/2021	0 mm
07/19/2020	arm	right	07/21/2020	0 mm
10/12/2019	LA	left	10/14/2019	0 mm
07/21/2018	arm	right	07/23/2018	0 mm
07/21/2017	arm	left	07/23/2017	0 mm
07/22/2016	arm	left	07/24/2016	0 mm
05/08/2014		left	05/10/2014	0 mm
07/17/2012	arm	left	- 07/19/2012	0 mm
07/08/2007	RA		07/11/2007	0 mm

Past Positive Symptom Check

Reviewed and all responses negative.

Comments: Denies black or tarry stools

Medical Observations

Tattoos/body piercing Seen a doctor within the past 6 months

Other: thumb and index finger missing right hand contractures as well to this hand /nerve

RICHARDSON, JONATHAN C. 000000127630

damage to

Physical Exam

Exam	Findings	Details
Constitutional	Normal	Well developed.
Eyes	Normal	Conjunctiva - Right: Normal, Left: Normal. Pupil - Right: Normal, Left: Normal.
Ears	Normal	Inspection - Right: Normal, Left: Normal. Canal - Right: Normal, Left: Normal. TM - Right: Normal, Left: Normal. Hearing - Right: Normal, Left: Normal.
Nose/Mouth/Throat	Normal	External nose - Normal. Lips/teeth/gums - Normal. Tonsils - Normal. Oropharynx - Normal.
Neck Exam	Normal	Inspection - Normal. Palpation - Normal. Thyroid gland - Normal.
Lymph Detail	Normal	No cervical or supraclavicular adenopathy.
Respiratory	*	Auscultation - Location: anterior, Findings: bilateral insp and exp wheezin.
Respiratory	Normal	Inspection - Normal. Effort - Normal.
Cardiovascular	Normal	Regular rate and rhythm. No murmurs, gallops, or rubs.
Vascular	Normal	Pulses - Dorsalis pedis: Normal.

DEPARTMENT OF CORRECTIONS ANNUAL NURSE WELL ENCOUNTER

SITE: BTC

COMPLETED BY: Cheryl A. Hauser, RN 07/26/2023 9:31 AM

Inspection - Normal. Auscultation - Normal. No abdominal tenderness. **Abdomen** Normal

No hepatic enlargement. No spleen enlargement.

Inspection - Normal. Skin Normal

Extremity Normal No edema.

Neurological Normal Memory - Normal.

Psychiatric Orientation - Oriented to time, place, person & situation. Appropriate Normal

mood and affect. Normal insight. Normal judgment.

Review/Comments

Chronic disease current Health maintenance current Communicable disease testing current Medical classification current Disability status code current Patient smokes 14.00 packs a year

Comments: STE paper education sheet to patient, TDAP done 2019, HAV 2019 Lipids 2023 ROI signed, Has had CPCT in the past 12 months, Glucose done 4-1-23 IS not at risk for falls, States just had STD testing completed/with negative results Cleared to work

Suicide Risk Screening

- 1. Arresting or transporting officer believes subject may be suicide risk. No
- 2. Lacks close family/friends in community. No
- 3. Experienced a significant loss within last 6 months (loss of job, relationship, death of close family member). No
- 4. Worried about major problems other than legal situation (terminal illness). No
- 5. Family member or significant other has attempted or committed suicide (spouse, parent, sibling, close friend, and lover). Yes
- 6. Has psychiatric history (psychotropic medication or treatment). Yes
- 7. Holds position of respect in community (i.e., professional, public official) and/or alleged crime is shocking in nature. Expresses feelings of embarrassment/shame. No
- 8. Expresses thoughts about killing self. No
- 9. Has a suicide plan and/or suicide instrument in possession. No
- 10. Has previous suicide attempts. (Note methods and dates). Yes
- 11. Expresses feelings there is nothing to look forward to in the future RICHARDSON, JONATHAN C. 000000127630 7/26/2023 09:31 AM Page: 34/291

DEPARTMENT OF CORRECTIONS ANNUAL NURSE WELL ENCOUNTER

#: 936

SITE: BTC

COMPLETED BY: Cheryl A. Hauser, RN 07/26/2023 9:31 AM

(feelings of helplessness and hopelessness). No

- 12. Shows signs of depression (crying, emotional flatness). No
- 13. Appears overly anxious, afraid or angry. No
- 14. Appears to feel unusually embarrassed or ashamed. No
- 15. Is acting and/or talking in a strange manner. Cannot focus attention; hearing or seeing things not there). No
- 16. History of substance abuse treatment? No
- 17. Is apparently under the influence of alcohol or drugs. No
- 18. If YES to #17, is individual incoherent or showing signs of withdrawal or mental illness. No

Total Yes's: 3

Comments:

5) GF committed suicide about a month ago after losing a baby , he has seen MHP for this 3) Gender idenity Depression

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Completed By: Cheryl A. Hauser, RN

Date Completed: 07/26/2023

JONATHAN C. RICHARDSON Offender Name:

DOB:

C

Gender: male Name of Facility: **BTC**

IDOC Number: #127630

PHYSICAL HEALTH STATUS CLASSIFICATION

Medical Code: G2

Free of illness or injury; free of physical impairment; individuals with short term self-limiting condition Δ. requiring minimal surgical, medical, nursing or dental intervention limited to 30 days duration.

> This category includes all minor health care conditions such as colds or other short-lived viral conditions, simple lacerations requiring sutures and plaster casts or fixation devices which do not dramatically interfere with ambulation or work.

Conditions in this classification do not require accessibility housing or residential (impatient or infirmary) support. Heath care intervention, if necessary, is limited to periodic consultation, treatment or evaluation by a physical health provider, nursing or dental personnel.

Patients requiring ongoing clinical assessments or treatments, which must be performed by health care staff several times a week or more, may not be assigned to this classification. Patients capable of performing self-care (i.e. can do their own dressing changes) may remain in this category if they would otherwise qualify.

Illnesses that do or will recurrently require skilled nursing care of any chronic physical or cognitive B. disability which requires on-going nursing care. Needs inpatient bed or immediate access to an inpatient bed.

> This category incudes all conditions in which continuous or intermittent impatient or infirmary care is needed. Conditions in this classification include terminal illnesses in the late stages such as cancer, AIDS, end stage cardiac, respiratory or liver disease, and chronic physical or cognitive conditions which severely restricts the patient's ability to participate in activities of daily living such as quadriplegia, severe neuromuscular disorders, or late state Alzheimer's disease requiring skilled nursing care.

Renal failure requiring hemodialysis or peritoneal dialysis.

This category may also include patients with significant renal insufficiency in which a restrictive renal diet is necessary.

F. Physical health condition (including chronic care) requiring frequent monitoring/surveillance and the on-site availability of licensed health care personnel twenty-four-hours per day or the incarcerated

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

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Division of Medical and Clinical Healthcare Services

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

individual is frail and debilitated.

This category includes any condition or illness that is chronic and requires frequent or recurring consultation, evaluation and/or treatment by health care personnel and the immediate availability of licensed health care personnel. Uncontrolled diabetes (e.g. HbgA1C is greater than 8), uncontrolled hypertension, seizure disorders with poor control, asthmatics prone to exacerbations and unstable angina are examples.

This code should also be used for patients who are frail or debilitated residing on a "medical dorm. In general, before an F code may be changed to a "G" code, the health status of the patient must be stable, without medication for at least 90 days.

Any stabilized, permanent or chronic physical or medical condition in which:

Frequent monitoring/surveillance is not needed:

1.

J.

The incarcerated individual demonstrates an appropriate degree of knowledge and motivation and is able to perform self-care:

- 3. A twenty (20) pound or greater weight lifting restriction is needed.
- Negative Air Flow Room; 4.
- Traumatic Brain Injury or Dementia.

This category includes any condition or illness in which frequent consultation, evaluation and/or treatment by medical or nursing personnel is not needed. Examples include stable angina, controlled

diabetes (e,g, HbgA1C is less than 8) stable asthmatics, controlled seizure disorders.

This category also includes any condition or illness in which the patient has completed a course or rehabilitation and/or received special training or instructions and demonstrates an ability to perform self-care. Examples of these conditions include stable insulin dependent diabetics, patients with ostomies and conditions which require restrictions in lifting to 20 pounds or less.

Patients with reactive TB skin test (not active disease) receiving TB prophylactic medication such as isoniazid (INH) should be assigned to this category; patients with active disease are to be placed in this code category when they are stable on oral medication and no longer contagious.

Short term self-limiting conditions of 31 to 180 days duration; conditions which may require a

placement in an observation/short stay infirmary bed or requires that an inmate be placed in a negative

pressure room.

This category includes any condition or illness which is not permanent or progressive and not expected to last longer than 180 consecutive days. Conditions in this classification may require a limited stay in an observation/short stay infirmary bed. Examples of such conditions are extensive dental treatment, awaiting or recuperating from surgery, fractures requiring casts, stabilizing braces or pins which dramatically affects a patient's ability to ambulate or work for a period of time not to exceed six (6) months or a patient who is being worked up for tuberculosis.

Pregnancy.

This category includes all pregnant women up to the six (6) weeks post-partum exam.

. Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Date: 07/26/2023 09:32 AM Provider: Christina Nudi FNP

Document generated by: Cheryl A. Hauser, RN 07/26/2023 09:32 AM

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

SPECIAL NEEDS / URGENT ORDERS

SITE: BTC



Division of Medical and Clinical Healthcare Services

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Facility: BTC

PATIENT:

JONATHAN C RICHARDSON

DOB:

127630

DOC#: DATE:

07/24/2023 11:01 AM

DOCUMENT GENERATED BY:

Melissa G. Overstreet, RN

Restriction Orders

Order Start End **Comments** Ordered By No work in the kitchen 07/24/2026 07/24/2023 Melissa G. Overstreet, RN

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

NAME: RICHARDSON, JONATHAN C

NUMBER: 127630



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Facility: BTC

PATIENT:

DATE OF BIRTH:

DOC #:

DATE:

VISIT TYPE:

JONATHAN C RICHARDSON

127630

07/24/2023 11:01 AM

Nurse Visit

Nurse Visit

Reason for visit Reclass/restrict

Nurse Protocols:

Review/Comments

Patient smokes 14.00 packs a year

Medications

Medication • • •	Sig	PRN	PRN Reason	Comment
		Status		
albuterol sulfate concentrate 2.5	inhale 0.5 milliliter by	N	1	
mg/0.5 mL solution for nebulization	nebulization route 3 times every day (to be given from stock)		5 1	
estradiol 2 mg tablet	take 3 tablet by oral route every day	N		
fluticasone 113 mcg-salmeterol 14 mcg/actuation breath activated powdr	inhale 1 puff by inhalation route 2 times every day approximately 12 hours apart at the same times each day	N		
Proventil HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route 4 times every day as needed for SOB and wheezing	Y		
Singulair 10 mg tablet	take 1 tablet by oral route every day in the evening	N		
spironolactone 100 mg tablet	take 2 tablet by oral route every day	N		

Orders

Status Order **Timeframe** Duration Frequency Stop Date ordered No work in the kitchen

Patient Name: RICHARDSON, JONATHAN C ID: 127630 Date of Birth:

Page 40 of 291 Encounter Date: 07.24/2023 11:01 AM

ordered	Medical Restrictions			
<u>General Co</u>	mments			
No work in t	the kitchen due to unstable	asthma and environm	ental conditions.	
Document g	generated by: Melissa G. Ov	erstreet, RN 07/24/20	023 11:04 AM	

	ernment Center South			
	shington Street			
Indianapolis	s, IN 46204			

Patient Name: RICHARDSON, JONATHAN C ID: 127630 Date of Birth:

Page 41 of 291 Encounter Date: 07/24/2023 11:01 AM

SPECIAL NEEDS / URGENT ORDERS

SITE: BTC



Division of Medical and Clinical Healthcare Services

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Facility: BTC

PATIENT:

JONATHAN C RICHARDSON

DOB:

127630

DOC#: DATE:

07/22/2023 2:11 PM Amy L. Johnson, LPN

DOCUMENT GENERATED BY:

Restriction Orders

Order	Start	End	Comments	Ordered By_
Medical Restrictions	07/22/2023	07/23/2023	Restriction not related to work. Lay-in for 2 days (out of cell/bunk only for meals, medications, and bathroom).	Amy L Johnson, LPN

restriction ends 7/24/23

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

NAME: RICHARDSON, JONATHAN C

NUMBER: 127630

D.O.B :

STATE001063



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Facility: BTC

PATIENT:

JONATHAN C RICHARDSON

DATE OF BIRTH:

127630

DOC #: DATE:

07/22/2023 2:11 PM

VISIT TYPE:

Nurse Visit

Nurse Visit

Reason for visit nebulizer tx

Vital Signs

Height

пеідік							
Time	ft	in	cm	Last Measured	Japan	_Height Position	
8:18 PM	5.0	11.0		02/08/2014		0	

Weight/RSA/RMI

TTEIGHT DS	A DIAII						
Time	lb	oz	kg	Context	BMI kg/m2	BSA_m2	
8:18 PM	213.0		96.615	dressed with shoes	29.70	2.20	_

Blood Pressure

Time	BP_mm/Hg_	Position	Side	Site	Method	Cuff Size
8:20 PM	130/86	sitting	left	arm	manual	adult large
8:18 PM	128/88	sitting	right	arm	manuai	adult large

Temperature/Pulse/Respiration

		F				
Time	Temp F	Temp C	Temp Site	Pulse/min_	Pattern	。 Resp/ min
8:20 PM		, in a mean		93	regular	20
8:18 PM				88	regular	20

Pulse Oximetry/FIO2

I GISC ON								
Time	Pulse Ox	Pulse Ox	O2 Sat	O2 L/Min Timing	FiO2	L/min	Delivery	Finger Probe
	(Rest %)	(Amb %)_	<u> </u>		%		Method	
8:20 PM	96		RA					
8:18 PM	96		RA					

Peak Flow

Patient Name: RICHARDSON, JONATHAN C ID: 127630 Date of Birth:

Page 43 of 291 Encounter Date: 07/22/2023 02:11 PM

Time	PeakFlow L/min	Timing	Method	Transition of the state of the
8:20 PM	208	Post-tx		44.00
8:18 PM	233	Pre-tx		

Comments

Time	Comments
8:20 PM	patietn coughing, non productive rubs heard in upper lobes.
8:18 PM	wheezing and rubbing throughout.

Measured By

Time	Measured by		Ţ	
8:20 PM	Amy L. Johnson, LPN	31.713	 	
Q-1Q DM	Amy I Johnson I PNI			

Nurse Protocols:

Review/Comments

Patient smokes 14.00 packs a year

Medications

Medication	Sig	PRN Status	PRN F	Reason	Comment
albuterol sulfate concentrate 2.5 mg/0.5 mL solution for nebulization	inhale 0.5 milliliter by nebulization route 3 times every day (to be given from stock)	N			1 3 3 10 10 10 10 10 10 10 10 10 10 10 10 10
estradiol 2 mg tablet	take 3 tablet by oral route every day	N			
fluticasone 113 mcg-salmeterol 14 mcg/actuation breath activated powdr	inhale 1 puff by inhalation route 2 times every day approximately 12 hours apart at the same times each day	N			
Proventil HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route 4 times every day as needed for SOB and wheezing	Y			
Singulair 10 mg tablet	take 1 tablet by oral route every day in the evening	N			
spironolactone 100 mg tablet	take 2 tablet by oral route every day	N			

Orders

Status	Order	Timeframe	Frequency	Duration	Stop Date
ordered	Medical Restr	ictions			

General Comments

Patient Name: RICHARDSON, JONATHAN C D: 127630 Date of Birth:

Page 44 of 291 Encounter Date: 07/22/2023 02:11 PM patient sent to medical for breathing tx from kitchen, coughing, lungs wheezing/rubbing, tx given. patient sat in medical until cough quitened and felt better, patient was sweating upon arrival to medical, patient getting hot and then has difficulty breathing, 2 day lay in given, patient should utilize txs more oftern.

Document generated by: Amy L. Johnson, LPN 07/22/2023 08:25 PM

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Patient Name: RICHARDSON, JONATHAN C ID: 127630 Date of Birth:

Page 45 of 291 Encounter Date: 07/22/2023 02:11 PM



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Facility: BTC

PATIENT:

JONATHAN C RICHARDSON

DATE OF BIRTH:

127630

DOC #: DATE:

07/16/2023 7:45 PM

VISIT TYPE:

Nurse Visit

Nurse Visit

Reason for visit lab draw

Nurse Protocols:

Review/Comments

Patient smokes 14.00 packs a year

Medications

Medication	Sig	PRN PRN Reason Comment Status
albuterol sulfate concentrate 2.5 mg/0.5 mL solution for nebulization	inhale 0.5 milliliter by nebulization route 3 times every day (to be given from stock)	N
estradiol 2 mg tablet	take 3 tablet by oral route every day	N
fluticasone 113 mcg-salmeterol 14 mcg/actuation breath activated powdr	inhale 1 puff by inhalation route 2 times every day approximately 12 hours apart at the same times each day	N
prednisone 20 mg tablet	take 3 tablet by oral route x4 days, 2 tabs x4 days, 1 tab x 2 days	N
Proventil HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route 4 times every day as needed for SOB and wheezing	Υ
Singulair 10 mg tablet	take 1 tablet by oral route every day in the evening	N
spironolactone 100 mg tablet	take 2 tablet by oral route every day	N

Patient Name: RICHARDSON, JONATHAN C D: 127630 Date of Birth:

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<u>Orders</u>	
Status	Order Timeframe Frequency Duration Stop Date
completed	HIV, 4TH GEN AG/AB
•	(DIAG)/C REF
completed -	CHLAMYDIA/GC BY
	URINE
completed	HEP C AB

completed RAPID PLASMA REAGIN

General Comments

VP completed in LAC with 23g butterfly needle x1 attempt, tolerated well. Collected 1 SST and a urine specimen.

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Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Patient Name: RICHARDSON, JONATHAN C ID: 127630 Date of Birth:

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DEPARTMENT OF CORRECTIONS ADMINISTRATIVE NOTE

#: 949

SITE: BTC

COMPLETED BY: Patricia Thompson, RN 07/15/2023 10:59 AM



Division of Medical and Clinical Healthcare Services

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Facility: BTC

PATIENT:

DATE OF BIRTH:

DOC #:

DATE:

VISIT TYPE:

JONATHAN C RICHARDSON

127630

07/15/2023 10:59 AM

Chart Update

Issue

chart check complete

Provider: Samuel J. Byrd MD

Document generated by: Patricia Thompson, RN 07/15/2023 10:59 AM

Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204



Indiana Government Center South 302 W. Washington Street Indianapolis, IN 45204

Facility: BTC

PATIENT:

JONATHAN RICHARDSON

DATE OF BIRTH:

DOC#:

127630

DATE:

07/13/2023 08:34 AM

HISTORIAN:

self

VISIT TYPE:

Provider Visit

Established patient

Historian: self

History of Present Illness:

1. ASTHMA FLARE UP

Reports is having SOB issues.

Was started on inhalers, has been coming for neb tx.

Has had 7 tx over past 2w.

Reports that the heat is making his SOB worse.

Reports the SOB has increased over past 2 mos.

Kitchen duties are increasing SOB due to the nature of the kitchen work.

Feels lungs are getting squeezed, is coughing at this time.

2. DISCUSS HORMONE MEDS

Reports he has been on hormones for 3y.

Is wanting his meds increased.

wants progesterone increased to 8mg, wants spirilactone increased to 300mg.

feels he is not getting any benefit from what he is currently taking.

Is watching his numbers so when he gets out he can get surgery.

PROBLEM LIST:

Problem Description	Onset Date	Chronic	Clinical Status	Notes
Gender identity disorder of adulthood	06/17/2020	N		
Asthma	06/06/2023	N		
Gastroesophageal reflux disease	02/19/2015	Y .	·	Mapped from KBM Chronic Conditions table on 05/09/2016 by the ICD9 to SNOMED Bulk Mapping Utility. The mapped diagnosis code was Esophageal reflux, 530.81, added by Paul A. Talbot, MD, with responsible provider Paul A. Talbot MD. Onset date 02/19/2015.
Borderline personality disorder	05/04/2010	Y		Mapped from KBM Chronic Conditions table on 05/09/2016 by the ICD9 to SNOMED Bulk Mapping

RICHARDSON, JONATHAN C. 000000127630

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Utility. The mapped diagnosis code was Borderline personality disorder, 301.83, added by Darla Hinshaw, MD, with responsible provider. Onset date 05/04/2010; Axis II.

Recurrent major

10/21/2019

depressive episodes,

mild

Problem List (not yet mapped to SNOMED-CT®):

Problem List (not yet mapped to Si		
Problem Description	Onset Date Notes	
Asthma	03/19/2007	were consumerate to the constant of the constant of the constant of
Polysubstance Dependence	(01/17/2011)	
major depression in remission	01/17/2011	
Nonspecific reaction to tuberculin	02/01/2011	
skin test witho		
Epilepsy	06/11/2015	

Alleraies

Allergies			
Ingredient	Reaction	Medication Name	e Comment
PENICILLINS	Rash		
IBUPROFEN	Rash		
CEFTRIAXONE SODIUM	SOB, chest pressure,	ROCEPHIN	Pt was given
	rash		0.5mg Epi x1
			and NS IV w/
•			good results

Physical Exam

Exam	Findings	Details
General Exam	Comments	trace edema to feet bilateral
Constitutional	*	Overall appearance - chronically ill-appearing.
Respiratory	*	Auscultation - Side: bilateral, Location: posterior, Findings: wheezing-moderate.
Respiratory	Normal	Inspection - Normal. Effort - Normal.
Psychiatric	*	Poor insight. Poor judgment.
Psychiatric	Normal	Orientation - Oriented to time, place, person & situation. Appropriate mood and affect.

Suicide Risk Screening

Assessment/Plan

#	Detail Type	Description
1.	Assessment	Asthma (493).
100	Impression	Given steroids to help w/ breathing, chest full of wheezing
:		Discussed how to take steroids, he reports he has taken them before.
	`d\$4 . 24	hydrate
. 6		no other NSAIDs while taking steroids.
M. 7. 50	Patient Plan	The patient verbalized an understanding of the plan. Medication instructions were
		provided to the patient.
2.	Assessment	Gender identity disorder in adults (302.85).
	Impression	Prefers to be addressed as she
		is concerned about doseage of meds
		Wants them higher

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